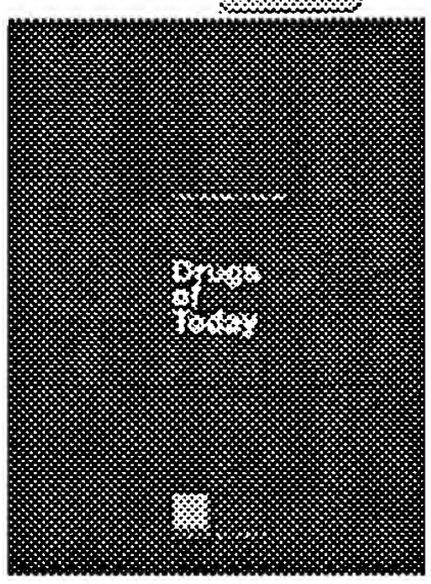

Drugs of Today

Drugs Today 1998, 34(5): 463
ISSN 0025-7656

CCC: 0025-7656

Pharmacology of immunosuppressive drugs

Olyaei, A.J., et al.

Immunosuppressive therapy of solid organ transplantation has become more potent, effective and selective since the results of earlier use of prednisone and azathioprine post renal transplantation. Calcineurin inhibitors and mycophenolate mofetil have been important additions to the effective antirejection armamentarium. Today, ciclosporin, tacrolimus, azathioprine, mycophenolate and prednisone are all effective immunosuppressive agents and are the cornerstone of immunosuppressive protocols used posttransplant. However, the use of these agents is hindered by a 20% rate of rejection, lack of selectivity and a high rate of major adverse drug reactions which ultimately lead to a decrease in patient and graft survival. A number of clinical trials are underway to compare efficacy, safety and tolerability of different combination protocols to improve patient and allograft survival and decrease adverse drug reactions. Clinical knowledge of the pharmacology, pharmacokinetics, pharmacodynamics, ad-verse drug reactions and therapeutic drug monitoring of antirejection agents is essential for designing an effective immunosuppressive protocol for individual solid organ transplant recipients. The clinical application of pharmacotherapeutic principles into the clinical practice will improve both long-term patient and allograft survival while minimizing systemic toxicity of immunosuppressive drugs.

Full Text: HTML, PDF

Limits: **Publication Date to 2000**

1: Ther Drug Monit. 1999 Jun;21(3):325-6.

LWWonline Lippincott Williams & Wilkins

Measurement of mycophenolate mofetil plasma levels after heart transplantation and a potential side effect of high levels.

Dubrey SW, **Holt DW**, **Banner N**.

Transplant Unit, Royal Brompton and Harefield NHS Trust, Harefield Hospital, Middlesex, United Kingdom.

Mycophenolate mofetil (MMF) is gaining momentum in its use as an immunosuppressant and in the field of heart transplantation because of its efficacy and ease of use without a reported need to monitor plasma levels. We describe a case in which standard dosage of MMF (initially 1.5 g twice daily) produced elevated trough levels of mycophenolic acid (MPA). Although organ rejection was eradicated by the use of MMF, the patient developed severe anemia, which required repeated blood transfusions while the patient was on therapy. This case illustrates the potential value of monitoring MPA concentrations.

Publication Types:
- Case Reports

PMID: 10365646 [PubMed - indexed for MEDLINE]